CENTRAL FAX CENTER AUG 2 1 2007

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TOTAL A NICE ATT	VEL A T	Application Number	09/582,916	┧						
TRANSMIT FORM		Filing Date	October 2, 2000	_]						
(to be used for all correspondence		First Named Inventor	Carl Anthony Blau							
		Group Art Unit	1633							
•		Examiner Name	Anne Maric Sabrina Wehbé	1						
Total Number of Pages in This Subr	mission 32	Attorney Docket Number	034186.001120							
ENCLOSURES (check all that apply)										
E Fee Transmittal Form	Assignu Assignu	nent Papers	After Allowance Communication to Group	1						
Foe Attached	m '	Application)	Appeal Communication to Board of Appeals and Interferences	1						
		(5) tion and Power of Attorney	Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)	ľ						
, After Final	Licensin	ng-related Papers	Proprietary Information	1						
Affidavits/declaration(s)	Petition		Status Letter	١						
Extension of Time Request		to Conven to a Provisional	Application Data Sheet  Request for Corrected Filing Receipt with	-						
	Applica		Enclosures	ı						
		of Attorney, Revocation of Correspondence Address	A self-addressed prepaid postcard for acknowledging receipt							
	Termina		Other Enclosure(s) (please identify below):							
Document(s)	Certified Copy of Priority  Document(s)  Request		Article cutilled: Activation and Functional	١						
Response to Missing Parts/		mber of CD(s)	Analysis of Janus Kinase 2 in BA/F3 Cells Using the Coumermycio/Gyrase B System	ı						
Incomplete Application		· · · · · · · · · · · · · · · · · · ·								
Response to Missing Parts under 37 CFR 1.52 or 1.53		The Commissioner is hereby authorized to charge any additional fees required or credit any overpayments to Deposit Account No. 19-2380 for the								
		above identified docket num		┪						
		LICANT, ATTORNEY, C	JR AGEN1	ᅦ						
or	Mary S. Webster (Rog	istration No. 37,156)		ı						
Individual name Nixon Peabody LLP 401 9th Street, N.W.										
	Suite 900 Washington, D.C. 200	104_21 <b>2</b> 8		ı						
		1								
Signature	رے ۱/۱(۵۷ کے ۱/۱) August 21, 2007	les o		-						
Date	-14Enst 21, 2007			_						
CERTI	FICATE OF MAILIN	IG OR TRANSMISSIO	N [37 CFR 1.8(a)]	٦						
I hereby certify that this corre										
deposited with the U	Inited States Postal Se elope addressed to: M	ervice on the date shown Jail Stop, Co	below with sufficient postage as first mmissioner for Patents, P. O. Box 1450	,						
Alexandria, VA 223			T-4	į						
transmitted by facsing (571) 273-8300	mile on the date show		ates Patent and Trademark Office at							
August 21, 2007	000000000000000000000000000000000000000									
Date Signature										
Moira Anderson  Typed or printed name										
1 yped or pruned name										

## FEE TRANSMITTAL **FOR FY 2005**

Patent fees are subject to annual revision,

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

	Complete if Known			
Application Number	09/582,916			
Filing Date	October 2, 2000		.05%	
First Named Inventor	Carl Anthony Blau		CEIVE	
Examiner Name	Anne Marie Sabrina Wehbé	CENTR	AL FAX C	ENTER
Art Unit	1633	ΔΙΙ	6 2 1 2	107
Attorney Docket No.	034186.001120			ישן

METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)					
Check C Credit Card Money Other None		DDITIO	NAL I	FEES			
Deposit Account:		Entity	Small	Entity	· ·		
Deposit Account 19-2380		Fee	Fee	Fee	Fee Description		
Account 19-2380 Number	Code 1051	(\$) 130	2051	( <b>5</b> ) 65	Surcharge - late filing fee or oath	· ·	
<u> </u>	1052	50	2052	25	Surcharge - late provisional filing fee or cover		
					sheet		
Account Nixon Peabody LLP	1053	130	1053	130 -	Non-English specification		
Name Name		2,520	1812	2,520	For filing a request for ex parte recxamination		
The Commission of the supplication of the state of the complete		920-	1804	920*	Requesting publication of SIR prior to Examiner action		
The Commissioner is authorized to: (check all that apply)  Change fee(s) indicated below Credit any overpayments		1,840*	1805	1,840*	Requesting publication of SIR after Examiner		
Charge any additional fee(s)	1251	120	2251	60	Extension for reply within first month		
Charge fee(s) indicated below, except for the filing fee	1252	450	2252	225	Extension for reply within second month		
to the above-identified deposit account.	1253	1,020	2253	510			
	4	•	2254	795		0.00	
FEE CALCULATION	1254	1,590			Extension for reply within fourth month		
1. BASIC FILING FEE	1255	2,160	2255	1,080	Extension for reply within fifth month		
Large Entity Small Entity Fee Fee Fee Fee Description	1401	500	2401	250	Notice of Appeal		
Code (5) Code (5) Fee Paid	1402	500	2402	250	Filing a brief in support of an appeal		
·	1403	1,000	2403	500	Request for oral hearing		
1001 300 2001 150 Utility filing foe	1451	1,510 500	1451 2452	1,510 250	Petition to institute a public use proceeding  Petition to revive - unavoidable		
1002 200 2002 100 Design filing fee	1452		1				
1003 200 2003 100 Plant filing fee	1453	1,500	2453	750	Petition to revive – unintentional		
1004 300 2004 150 Reissue filing fee	1501	1,400	2501	700	Utility issue fee (or reissue)		
1005 200 2005 100 Provisional filing fee	1502	B00	2502	400	Design lasue fee		
	1503	1,100	2503	550	Plant issue fee		
SUBTOTAL (1) (\$)	1460	130	1460	130	Petitions to the Commissioner	İ	
	1807	50 '	1807	50	Processing fee under 37 CFR 1.17(q)		
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1806	180	1806	180	Submission of Information Disclosure Strat		
Fee from		40	8021	40	Recording each patent assignment per property		
Total Claims 88 -88** - 0 X - 0		790	2809	395	(times number of properties) Filing a submission ofter final rejection		
Independent 10 10** = 0 X \$ \$	1810	790	2810	395	(37 CFR 1.129(a)) For each additional invention to be examined		
Claims Multiple Dependent  X = 0	1801	790	2801	395	(37 CFR 1.129(b)) Request for Continued Examination (RCE)		
Large Eauty Small Entity	1802	900	1802	900	Request for expedited examination of a design		
Fee Fee Fee Fee <u>Fee Description</u>		200			application		
Code (\$) Code (\$)	Other	ice (speci	fy)				
1202 50 2202 25 Claims in excess of 20							
1201 200 2201 100 Independent claims in excess of 3	*Redi	iced by Bi	asic Fili	ng Fes Paid	SUBTOTAL (3) (5) 510.00		
1203 360 2203 180 Multiple dependent claim, if not paid		-					
1204 200 2204 100 ** Reissue independent claims over	CERTIFICATE OF MAILING OR TRANSMISSION [37 CFR 1.8(a)]			_			
original patent 1205 50 2205 25 ** Reissue claims in excess of 20 and	I be		•	-	ndence is being:		
over original patent	1	deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendoter,					
SUBTOTAL (2) (S)  **or number previously paid. if greater, For Reissuea, acc above		Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450					
or number previously paid. It greates; For Russiana, acc above	transmitted by facsimile on the date shown below to the United States Patent and						
		8- 21-57 Morra and 500					
			ate		Signature	-	
	Moire Andresson  Typed or printed name					_	
	<u></u>		_				
SUBMITTED BY	Danis	tration N	10	27 156	Complete (if applicable)		
Name (Print/Type) Mary St Webster		tration N ney/Age		37,156	Telephone (202) 585-8370		
Signature /// Au Signature	\===================================		7		Date August 21, 2007		
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